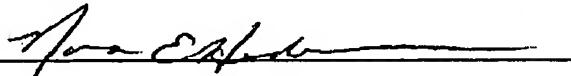


Henderson Patent Law**13 Jefferson Drive
Londonderry, New Hampshire 03053****voice/fax: 603-437-4400
normahenderson@adelphia.net****JUN 24 2006****FACSIMILE TRANSMITTAL SHEET****FROM: Norma E. Henderson****CONFIDENTIALITY NOTICE****DATE: June 24, 2006****NUMBER OF PAGES TRANSMITTED
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TO: Examiner Jeffrey S. Lundgren, Art Unit 1639**FIRM: U.S. Patent and Trademark Office****RE: Power of Attorney/Change of Correspondence Address – Pat. App. Ser. No.
10/622,126****PHONE
NUMBER: 571-272-5541****FAX
NUMBER: 571-273-8300****NOTES/COMMENTS:****POA/COA for Patent Application Ser. No. 10/622,126 (Docket No. 056754/0125184).****The following items are being sent herewith:**

- Transmittal (1 page)
- Power of Attorney/Change of Correspondence Address (1 page)
- Assignee Statement (1 page)

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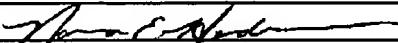
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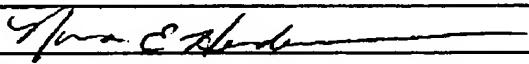
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TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>		Application Number	10/622,126
		Filing Date	July 17, 2003
		First Named Inventor	Jacobson, Joseph M.
		Art Unit	2592
		Examiner Name	Lundgren, Jeffrey S.
Total Number of Pages in This Submission	3	Attorney Docket Number	056754/0125184

ENCLOSURES <i>(Check all that apply)</i>			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Assignee statement under 37 CFR 3.73(b)	
		Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Henderson Patent Law		
Signature			
Printed name	Norma E. Henderson		
Date	June 24, 2006	Reg. No.	39218

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Norma E. Henderson	Date	June 24, 2006

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/622,126
Filing Date	7/17/2003
First Named Inventor	Jacobson, Joseph M.
Title	Molecular Assembly Lines, Memory, Shift Registers, and Bi-Stable Switches
Art Unit	1639
Examiner Name	Lundgren, Jeffrey S.
Attorney Docket Number	056754/0125184

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number:

26242

OR

 Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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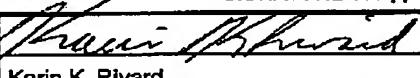
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I am the:

 Applicant/Inventor Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	May 4, 2006
Name	Karin K. Rivard	Telephone	617-253-6966
Title and Company	Assistant Director and General Counsel, MIT Technology Licensing Office		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 1 forms are submitted.

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Jacobson et al /Massachusetts Institute of TechnologyApplication No./Patent No.: 10/622,126 Filed/Issue Date: 7/17/2003Entitled: Molecular assembly lines, memory, shift registers, and bi-stable switchesMassachusetts Institute of Technology, a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

In the patent application/patent identified above by virtue of either:

A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 017559, Frame 0027, or for which a copy thereof is attached.

OR

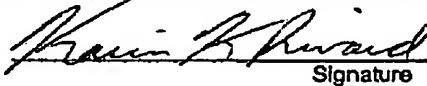
B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
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 Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.



Signature

Karin K. Rivard

Printed or Typed Name

Assistant Director and General Counsel, MIT Technology Licensing Office

Title



Date

617-253-6966

Telephone Number

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